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DLN: 93493134034874

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

B Ch	eck ıf a	pplicable	C Name of organization SAN DIEGO STATE UNIVERSITY FO		ding 06-30	-2013	D Emplo	yer ide	entification number
_	dress ch	-	DBA SDSU RESEARCH FOUNDATION Doing Business As	DN			95-60	4272	1
_ Na	me cha	inge	g						
Init	tıal retu	ım	Number and street (or P O box if 5250 CAMPANILE DRIVE	mail is not delivered to street address) Room/suite	2	E Telepho	one nun	nber
Tei	rmınate	ed	5230 CAMPAINILE DRIVE				(619)	594-	5771
Am	ended	return	City or town, state or country, an SAN DIEGO, CA 921821947	d ZIP + 4					
Apı	plication	n pending	,				G Gross r	eceıpts	\$ 217,288,435
			F Name and address of p BOBE WOLFSON	rıncıpal officer			hıs a group	retur	
			5250 CAMPANILE DRIVE			affil	ıates?		ΓYes Γ No
			SAN DIEGO,CA 921821	947		H(b) A re	all affiliate	s ınclı	uded? 「Yes 「No
r Ta	v-ever	npt status	<u> </u>	¶ (insert no)	F37	If"I	No," attach	a lıst	(see instructions)
					327	H(c) Gro	oup exempt	ion nu	mber ►
			TP //WWW FOUNDATION SD:						
			Corporation Trust Associa	tion Other 🕨		L Year of	formation 19	43 N	State of legal domicile CA
Pa	rt I	Sum	ımary						
				sion or most significant activitie		CERVICE		C 0 F	CD CII
		PROVID	DE SUPPORT TO THE RESEAR	RCH, EDUCATIONAL AND CO	MMUNITY	SERVICE	<u>PROGRAM</u>	SOF	SDSU
ر د	-								
Ė									
Ĭ									
sovemance	2 (Check th	his box 🔭 if the organization	discontinued its operations or d	isposed of	more than	25% of its	net a	ssets
	١.,	NI Is						۱ ـ	l
ර ආ	1			rning body (Part VI, line 1a) . s of the governing body (Part VI				4	16
Activities &	I		·	s of the governing body (Part V) n calendar year 2012 (Part V, li				5	4,156
Ì	1			fnecessary)				6	350
đ,	I		•	Part VIII, column (C), line 12				7a	108,979
			elated business taxable income			7b	-163,454		
	┪			,			ior Year		Current Year
	8	Contri	butions and grants (Part VIII,	line 1 h)			81,922,	586	74,353,144
₽	9			line 2g)			93,930,		90,034,253
Revenu	10			mn (A), lines 3, 4, and 7d) .			1,670,88		1,848,203
ď	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	11e)		-1,347,248		66,616
	12			.1 (must equal Part VIII, colum			176 177	305	166 202 216
	13			rt IX, column (A), lines 1-3)			176,177,		166,302,216
	14			t IX, column (A), line 4)			11,515,	0	13,934,418
	15			yee benefits (Part IX, column (A				\dashv	
8	13	5-10		yee benefits (Fare IX, column (A	۱, IIIIوع		94,904,	485	90,796,361
Expenses	16a	Profes	ssional fundraising fees (Part I			388,	389	267,526	
ੜੇ	Ь	Total fu	ındraısıng expenses (Part IX, column	(D), line 25) 🕨 4,580,605					
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .			63,495,	579	57,709,570
	18	Total	expenses Add lines 13-17 (m	nust equal Part IX, column (A), l	ıne 25)		170,708,	236	162,707,875
	19	Reven	ue less expenses Subtract lin	e 18 from line 12		+	5,468,		3,594,341
Net Assets of Fund Balances							ng of Curre Year	nt	End of Year
20 00 00 00 00 00 00 00 00 00 00 00 00 0	20	Total	assets (Part X, line 16)				186,545,	481	177,940,725
2 B	21						110,028,	-	97,791,019
25	22			ct line 21 from line 20			76,517,		80,149,706
Pai	t II		nature Block						· · ·
Jnde ny k	r pena nowled	alties of dge and	perjury, I declare that I have e	examined this return, including a omplete Declaration of preparei					
		****	***] .	2014-05-13		
Sigr	1	I B	ature of officer				Date		
Her		ВОВ	E WOLFSON EXECUTIVE DIRECTOR						
			e or print name and title						
			Print/Type preparer's name CHRISTOPHER M PEKULA	Preparer's signature	Da	ا ا	neck If	PTIN P0073	4965
Paid	d	<u> </u>	Firm's name MCGLADREY LLP		[lf-employed m's EIN 🟲 4		
Pre	pare								
Use	On	ly f	Firm's address 🟲 515 S FLOWER STRE	ET 41ST FLOOR		Ph	one no (213) 330-4	1800
		-	LOS ANGELES CA Q	0071					

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes 厂No

Form	990 (2012)					Page
Par		ent of Program Servichedule O contains a res				
1	Briefly describe	the organization's missio	n			
	VIDE SUPPORT T ECTIVES OF SDS		RE INTEGRAL	TO THE RESEARCH, ED	DUCATIONAL AND COMMUN	ITY SERVICE
2	the prior Form 99	tion undertake any signifi 90 or 990-EZ? e these new services on S		ervices during the year	which were not listed on	┌ Yes ┌ No
3	Did the organizat	tion cease conducting, or	make significa	nt changes in how it cor	nducts, any program	┌ Yes ┌ No
4	Describe the org	anızatıon's program servı	ce accomplishi 4) organization	s are required to report	ee largest program services, a the amount of grants and alloc	· ·
	(Code) (Expenses \$	86,555,691	ıncludıng grants of \$	13,934,418) (Revenue \$	51,844,747)
		OUNDATION ("SDSURF") ADMI R REGION, THE NATION, AND		OR THE SPONSORED RESEAR	CCH EFFORTS OF SDSU FACULTY WHO	O ARE RESEARCHING ISSUES
4b	(Code) (Expenses \$	29,435,734	ıncludıng grants of \$) (Revenue \$	33,146,912)
	SDSURF ADMINISTI	ERS FUNDS THAT SUPPORT TH	E WORK OF PROJ	ECTS THAT FOCUS ON CAMPU	JS AND COMMUNITY IMPROVEMENT	
4c	(Code) (Expenses \$	22,026,302	ıncludıng grants of \$) (Revenue \$	4,945,307)
	SDSURF ADMINISTI	ERS FUNDS FOR SDSU'S PUBLI	C BROADCASTING	ARM, KPBS		
	Other program s	services (Describe in Sch	nedule O)			

) (Revenue \$

including grants of \$

138,017,727

(Expenses \$

4e

Total program service expenses ►

art IV	Checkli	st of R	equired	Schedules
	CIICCKII	31 OI 10	-uuii -u	Schledules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Νo
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Νo
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

ŒП	Statements Regarding Other 1R5 Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 905			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
-	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
			;	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
:-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		NI -
a	organization solicit any contributions that were not tax deductible as charitable contributions?	oa		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
_	services provided to the payor?	76	Vaa	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b	Yes	
_	file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	a		
_	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
0	Enter the amount of reserves on hand	ļ ļ		
3	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No.
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a	Yes	
h	more members of the governing body?	7a 7b	Yes	
	or persons other than the governing body?	75	1 65	
8	year by the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ا م		No
	organization's maining address. It res, provide the maines and addresses in Schedule O	_		140
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R		ıe Cod	
Se			ue Cod Yes	
				e.)
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		e.) No
10a b	Did the organization have local chapters, branches, or affiliates?	evenu 10a		e.) No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	e.) No No

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MELINDA S COIL 5250 CAMPANILE DRIVE SAN DIEGO, CA (619) 594-5771

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Fornier	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) ELIZABETH A KLONOFF	15 00	х						65,659	142,729	39,550	
RESEARCH-FACULTY	35 00							03,037	172,723	33,330	
(2) KAREN D EMMOREY	15 00	x		Х				78,363	104,975	48,209	
SEC-RESEARCH-FACULTY	35 00							,	,	,	
(3) MARILYN NEWHOFF	1 00	×						0	184,402	43,027	
DIRECTOR-DEAN	39 00										
(4) MARY ANN LYMAN-HAGER	15 00	х						54,487	114,255	41,707	
RESEARCH-FACULTY (5) ROBERTA GOTTLIEB	35 00										
•	15 00	x						86,847	191,907	51,545	
RESEARCH-FACULTY (6) SALLY F ROUSH	35 00 5 00										
		×		х				0	301,568	54,654	
TREASURER (7) ELLIOT HIRSHMAN	45 00 5 00										
•		×		х				50,000	359,358	89,542	
PRESIDENT (8) RANDOLPH PHILIPP	45 00 15 00										
		х						20,116	114,150	44,047	
RESEARCH-FACULTY (9) STEPHEN WELTER	35 00 5 00										
•		х		Х				0	217,399	62,897	
VICE PRESIDENT (10) NANCY A MARLIN	45 00 5 00										
, ,		х						0	260,038	55,517	
DIRECTOR-PROVOST (11) SANFORD I BERNSTEIN	45 00 15 00										
		×						44,652	113,888	45,975	
RESEARCH-FACULTY (12) CRAIG HAUSER	35 00 1 00										
,		х						0	0	C	
DIRECTOR (13) KIM E BARRETT	0 00										
		х						0	0	C	
DIRECTOR (14) PAULA S BROCK	0 00										
DIRECTOR		х						0	0	(
(15) JOSH MORSE	0 00										
DIRECTOR		х						0	0	(
(16) WALTER A TURNER JR	2 00										
DIRECTOR		х						0	0	(
(17) BOB E WOLFSON	0 00										
				х				0	182,271	50,089	
EXECUTIVE DIRECTOR	0 00									Form 990 (2012	

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(18) MELINDA S COIL	50 00			х				155,563	0	36,166	
CFO	0 00			^				155,565	0	30,100	
(19) MICHELE GOETZ	50 00				х			155,563	0	29,851	
ASSOC EXEC DIRECTOR	0 00							155,563	0	29,851	
(20) WILLIAM T HUSHEN	50 00				X			163,110	0	38,979	
ASSOC EXEC DIRECTOR	0 00				^			103,110	0	30,373	
(21) THOMAS KARLO	50 00				x			0	214,509	56,330	
GENERAL MANAGER - KPBS	0 00							J	211,303	30,330	
(22) JOE B SHAPIRO	50 00				x			0	159,972	50,412	
DEAN - COLLEGE OF EXTENDED STUDIES	0 00				^			U	159,972	50,412	
(23) STEPHEN FISHER	50					x		660,180	274,623	66,325	
COACH	50 00					^		000,100	274,023	00,323	
(24) RODERICK LONG	50					Х		640,000	213,931	55,048	
COACH	50 00							040,000	213,931	33,040	
(25) EDWARD RILEY	15 00					Х		96,544	184,324	56,553	
RESEARCH-FACULTY	35 00					,		30,311	101,321	30,333	
(26) JAMES STERK	50					x		130,000	239,839	62,854	
ATHLETIC DIRECTOR	50 00									,	
(27) MELBOURNE HOVELL	15 00					l _x		111,460	154,775	55,195	
RESEARCH-FACULTY	35 00							111,100	131,773	33,133	
1b Sub-Total						•					
c Total from continuation sheets to Pa	art VII, Section A			•		▶ [
d Total (add lines 1b and 1c)						►		2,512,544	3,728,913	1,134,472	
Total number of individuals (including \$100,000 of reportable compensation)	g but not limited to	those	liste		bove	e) who	rec	eived more than			

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		,	1
	marvidua	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			1
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
COLLEGE CONTACTCOM HAMMER STR 39MUENSTERGM48153	STUDENT RECRUITMENT	727,981
NORDEA FINANS DANMARK CHRISTIANBRO STANDGADE 3COPEBHAGENDA0900	STUDENT RECRUITMENT	274,404
CARL BLOOM ASSOCIATES INC 81 MAIN STREET WHITE PLAINS NY 10601	MAIL SERVICES	255,561
IEC ONLINE INTERNATIONAL MARIENSTRA BE 19/20BERLINGM10117	STUDENT RECRUITMENT	194,918
MCGLADREY LLP 1455 FRAZEE RD 600 SAN DIEGO CA 92108	ACCOUNTING	190,764

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►13

Part V		Statement o	o f Revenue ule O contains a respon	ise to any dijection i	n this Part VIII	_		
				any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 2	1a	Federated cam	paigns 1a					
rant	b	Membership du	ies 1b	150,428				
· Gr	С	Fundraising eve	ents 1c	22,445				
ifts, ar A	d	Related organiz	zations 1d					
, G mila	e	Government grant	s (contributions) 1e	46,659,338				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	27,520,933				
ibu Xthe	g	Noncash contributi	ons included in lines	823,438				
ontr nd (1a-1f \$	- 1 - 16		74,353,144			
a C	h	Total. Add lines	sla-ir		74,333,144			
en.	٦-	CONTRACTO COUE	DIMENT	Business Code				
yven	2a b	CONTRACTS GOVE FEES & TUITION	KNIMENT	541900	37,116,368	37,116,368		
e FR		CONTRACTS NON-	GOVED NIMENT	611600	30,977,664	30,977,664		
rwo	c d	CAMPUS & COMMU		541900 515100	14,728,379 7,211,842	14,728,379 7,114,332	97,510	
Se	e e	CHEROS & COMMI	21111	212100	7,211,842	7,114,332	97,510	
Program Serwce Revenue	f	All other progra	am service revenue					
<u></u>	g	Total. Add lines	s 2a-2f		90,034,253			
	3		ome (including dividend ar amounts)		1,805,881			1,805,881
	4		stment of tax-exempt bond p	H-				
	5	Royalties		🕨	249,078			249,078
			(ı) Real	(11) Personal				
	6a	Gross rents	9,863,415					
	Ь	Less rental expenses	10,003,387					
	С	Rental income or (loss)	-139,972					
	d	, ,	me or (loss)		-139,972			-139,972
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	24,582,474	16,229,738				
	b	Less cost or other basis and sales expenses	24,954,224	15,815,666				
	С	Gain or (loss)	-371,750	414,072				
	d	Net gain or (los	ss)		42,322			42,322
Other Revenue	8a	*	luding ,445 s reported on line 1c) ne 18					
je.	h	Less direction	nenses h	179,982				
o₩	b C		penses b (loss) from fundraising e	212,942 events .	-32,960			-32,960
_	9a	Gross income f	rom gaming activities ne 19		,			
	b	Loss direct ov	penses b					
	c		(loss) from gaming activ	/ities▶-				
	10a	Gross sales of returns and allo	ınventory, less					
			a					
	b		oods sold b					
	С	Net income or i	(loss) from sales of inve	Business Code				
	11a	PASSTHROUG		Susiness Code 515100	-9,530	223	11,469	-21,222
	b	rassinkuug	HI ENTITIES	- 13130	2,000			
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
	12		See Instructions	. -	-9,530			
	**	iocai ievenuė.	See THRUTUCHOUS	• • • •	166,302,216	89,936,966	108,979	1,903,127

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 6,746,779 6,746,779 Grants and other assistance to individuals in the United States See Part IV, line 22 6,974,339 6,974,339 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 213,300 213,300 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,163,050 375,324 787,726 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 68,683,121 56,896,291 10,334,075 1,452,755 Pension plan accruals and contributions (include section 401(k) 5,021,247 4,126,622 789,949 and 403(b) employer contributions) 104.676 10,464,302 8,599,899 1,646,258 Other employee benefits 218,145 10 5,464,641 4,491,017 859,705 113,919 11 Fees for services (non-employees) Management 286,747 34,410 252,337 Legal Accounting 190,764 190,764 175,775 175,775 Lobbying Professional fundraising services See Part IV, line 17 267,526 267,526 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 6,472,756 5,228,240 705,183 539,333 Schedule O) Advertising and promotion . . 12 13 Office expenses 14 Information technology . . 15 Royalties . 1,178,987 16 Occupancy 5,064,271 3,885,284 **17** 3,494,226 3,077,887 376,229 Travel 40.110 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . 4,582,386 4,007,497 423,864 151,025 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 4,890,308 4,890,308 89,440 23 487,845 352,655 45,750 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 13,790 a SUBCONTRACTS 10,942,159 10,928,369 SUPPLIES & EQUIPMENT 6,055,305 5,415,780 620,424 19,101 **DUES & FEES** 4,643,267 3,733,880 323,044 586,343 d BROADCASTING EXPENSE 3,048,045 3,046,032 909 1,104 e All other expenses 7,375,716 4,993,814 1,341,084 1,040,818 Total functional expenses. Add lines 1 through 24e 25 162,707,875 138,017,727 20,109,543 4,580,605 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

1 Cash-non-interest-bearing Segrating of year Enginency of year 1 Cash-non-interest-bearing Segrating Segrati	Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
2 Savings and temporary cash investments				(A)		
3 Piedges and grants receivable, net		1	Cash—non-interest-bearing	3,931,086	1	4,096,542
4		2	Savings and temporary cash investments	16,752,975	2	14,836,512
Source and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Source		3	Pledges and grants receivable, net	17,082,076	3	17,290,887
### Part II of Schedule L 5 5		4	Accounts receivable, net	4,313,932	4	5,048,819
Section Compare Com		5	employees, and highest compensated employees Complete Part II of		5	
9 Prepaid expenses and deferred charges 3,091,813 9 1,637,285	ts	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary			
9 Prepaid expenses and deferred charges 3,091,813 9 1,637,285	Se	_				
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10 b Less accumulated depreciation 10 d 48.380,288 84,982,070 10c 66,511,104 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 198,545,441 16 177,940,725 17 Accounts payable and accrued expenses 115,815,327 17 13,048,150 18 Grants payable 19 Deferred revenue 5,538,455 19 5,417,528 20 Tax-exempt bond liabilities 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D 21 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities not included on lines 17-24) Complete Part X of Schedule D 27 Organizations that follow SFAS 117 (ASC 958), check here ► F and complete lines 27 through 29, and lines 30 and 34. 26 University through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 30 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building or equipment fund 32,816,842 31 28,211,667 31 Paid-in or capital surplus, or land, building or equipment fund 32,816,842 31 28,211,667 32 Retained earnings, endowment, accumulated income, or other funds 33 Hotal net assets or fund balances 30 Hotal net assets or fund balances	As					
10a				0.004.040	-	4 007 005
Complete Part VI of Schedule D 10a 114,881,380 84,992,070 10c 66,511,104 11 1 1 1 1 1 1 1 1		-		3,091,813	9	1,637,285
11 Investments—publicly traded securities 56,381,529 11 68,519,576 12 Investments—other securities 56,381,529 11 68,519,576 13 Investments—other securities 58,341,529 13 13 14 Intangible assets 14 15 15 15 Other assets 58e Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 186,545,481 16 177,940,725 17 Accounts payable and accrued expenses 15,815,327 17 13,048,150 18 Grants payable 18 18 19 Deferred revenue 5,834,595 19 5,417,528 20 Tax—exempt bond liabilities 42,754,164 20 16,441,445 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 23 Secured mortgages and notes payable to unrelated third parties 12,064,597 23 19,513,053 24 Unsecured notes and loans payable to unrelated third parties 12,064,597 23 19,513,053 25 Total liabilities not included on lines 17-24) Complete Part X of Schedule D 22 26 Total liabilities not included on lines 17-24) Complete Part X of Schedule D 33,559,474 25 43,370,843 26 Total liabilities not included on lines 17-24) Complete Part X of Schedule 33,559,474 25 43,370,843 27 Unrestricted net assets 28 27 27 28 Temporarily restricted net assets 28 29 29 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here			Complete Part VI of Schedule D 114,891,390			
12 Investments—other securities See Part IV, line 11 13 13 14 14 15 15 15 15 15 15		b	Less accumulated depreciation	· · · ·	10c	<u> </u>
13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 15 15 15 15 15		11	•	56,381,529		68,519,576
14		12			12	
15			· ·			
16 Total assets. Add lines 1 through 15 (must equal line 34) 186,545,481 16 177,940,725 17						
17		15			15	
18 Grants payable 18 18 19 Deferred revenue 5,834,595 19 5,417,528 20 Tax-exempt bond liabilities 42,754,164 20 16,441,445 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 22 23 24 24 25 24 25 25 26 27 27 28 29 29 29 20 29 29 29 29		16				
19 Deferred revenue		17		15,815,327		13,048,150
20 Tax-exempt bond liabilities						
21 Escrow or custodial account liability Complete Part IV of Schedule D						
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20		42,754,164		16,441,445
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	200				21	
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	ij	22				
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	<u> </u>		persons Complete Part II of Schedule L		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	ت	23	Secured mortgages and notes payable to unrelated third parties	12,064,597	23	19,513,053
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule	00 550 474		40.070.040
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				· · · ·		
lines 27 through 29, and lines 33 and 34. 27		26		110,028,157	26	97,791,019
30 Capital stock or trust principal, or current funds	φ					
30 Capital stock or trust principal, or current funds	Ë	27			27	
30 Capital stock or trust principal, or current funds	<u>ව</u>					
30 Capital stock or trust principal, or current funds						
30 Capital stock or trust principal, or current funds	Ĭ		·			
30 Capital stock or trust principal, or current funds	<u> </u>		- · · · · · · · · · · · · · · · · · · ·			
31 Paid-in or capital surplus, or land, building or equipment fund 32,816,842 31 28,211,667 32 Retained earnings, endowment, accumulated income, or other funds 4,735,916 32 4,761,303 33 Total net assets or fund balances 76,517,324 33 80,149,706	0	30	•	38,964,566	30	47,176,736
33 Total net assets or fund balances	Š	31	Paid-in or capital surplus, or land, building or equipment fund	32,816,842	31	28,211,667
33 Total net assets or fund balances	AS	32	Retained earnings, endowment, accumulated income, or other funds	4,735,916	32	4,761,303
34 Total liabilities and net assets/fund balances	<u>₩</u>	33	Total net assets or fund balances	76,517,324	33	80,149,706
	~	34	Total liabilities and net assets/fund balances	186,545,481	34	177,940,725

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	,		166.3	302,216
2	Total expenses (must equal Part IX, column (A), line 25)	2			07,875
3	Revenue less expenses Subtract line 2 from line 1	-			
_		3		3,5	94,341
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		76,5	517,324
5	Net unrealized gains (losses) on investments				
•	Denoted compact and use of facilities	5		3	347,608
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments				
·	The period adjustments in the first transfer to the first transfer transfer to the first transfer transfe	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-8	309,567
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				703,307
	column (B))	10		80,1	49,706
Par	* T XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				.
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis F Both consolidated and separate basis			i	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b	Yes	

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

(A) SAN DIEGO **STATE UNIV**

Total

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

		he organ	n <mark>ization</mark> VERSITY FOUNDATION	NΩ					Employer	ident if i	cation n	umber	•	
			FOUNDATION	514					95-60427	721				
Pa	rt I	Reas	son for Public	c Charity Status	(All orga	ınızatıons ı	nust comp	lete this p			ions.			
				undation because it										
1	Г	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)												
2	Г	Ascho	ool described in :	section 170(b)(1)(A)(ii). (Atta	ch Schedule	e E)	·						
3	Г			ative hospital servic			•	170(b)(1)	(A)(iii).					
4	Γ		ıcal research org al's name, city, a	ganization operated i and state	ın conjunct	ion with a h	ospital desc	rıbed ın sec	tion 170(b)(1)(A)(i	iii). Ente	r the		
5	Γ	An org	ianization operat	ed for the benefit of iv). (Complete Part	_	r university	owned or op	perated by a	governmen	tal unıt	describe	ed in	_	
6	Г			al government or gov	•	l unıt descrı	bed in sectio	on 170(b)(1)(A)(v).					
7	Ė		, ,	ormally receives a s				` , `	, , , ,	rom the	general	public	2	
	_	descri	bed in section 1 7	70(b)(1)(A)(vi).(Co	mplete Pa	rt II)					J	•		
8		A com	munity trust des	cribed in section 17	0(b)(1)(A)(vi) (Comp	lete Part II)						
9		Anorg	janization that no	ormally receives (1) more thai	n 331/3% of	its support f	rom contrib	utions, mem	bership	fees, ar	nd gros	ss	
		•		s related to its exem	•	-		•	• •					
		•	•	investment income				•		tax) fro	m busın	esses		
	_	•		zatıon after June 30,				•	•					
10		Anorg	ıanızatıon organı	zed and operated ex	clusively t	o test for pu	blic safety	See section	509(a)(4).					
11	굣	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of												
		one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
		a								ıntegra	ated			
e	~			certify that the org			-				-	_		
	·	oťher t	:han foundation r	managers and other	than one o	r more publi	cly supporte	d organizat	ions describ	ed in se	ction 50	9(a)(1) or	
_			n 509(a)(2)											
f			organization rece this box	eived a written deter	mination fr	om the IRS	that it is a I	ype I, I ype	: II, or I ype	III sup	porting	organı	zation,	
g				6, has the organizati	on accept	ed anv gift o	r contributio	n from any	of the				Į.	
_		followi	ng persons?	,	•	, 5		,						
		(i) A p	erson who direct	tly or indirectly cont	rols, eithei	alone or to	gether with i	persons des	cribed in (ii)) .		Yes	No	
		and (11	ı) below, the gov	erning body of the si	upported o	rganızatıon?					11g(i)		No	
		(ii) A 1	famıly member o	f a person described	ın (ı) abov	e?					11g(ii)		No	
				entity of a person de							11g(iii)		No	
h		Provid	e the following ir	nformation about the	supported	organizatio	n(s)							
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) I:	s the	(v) Did yo	ou notify	(vi) Is	the	(vii) An	nount of	
	suppor			organization	organiza		the organization		tion organization i			monetary		
OI	rganiza	ation		(described on	col (i) l		ın col (i)	,	col (i) or			sup	pport	
				lines 1-9 above or IRC section	your gov docum	_	supp	orti	ın the l	J S ?				
				(see	uocum	iciit'								
				instructions))	Voc	N-	Voc	l Na	Voc	Ne				
			I	i l	Yes	No	Yes	No	Yes	No				

6

Yes

330373293

Yes

Yes

6,746,779

6,746,779

	(Complete only if you of Part III. If the organization	checked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ition failed to q	ualify under
	ection A. Public Support	idon ians to qu	anny under the	tests listed bei	ow, picase com	ipiete rait III.)	
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						
6	(f) Public support. Subtract line 5 from line 4						
S	ection B. Total Support			-			
	endar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
9	dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not						
10	the business is regularly carried on Other income Do not include gain or loss from the sale of capital						
11	assets (Explain in Part IV) Total support (Add lines 7 through						
12	10) Gross receipts from related activiti	es, etc (see inst	ructions)	l .	1	12	<u> </u>
13	First five years. If the Form 990 is this box and stop here	for the organizat	ion's first, second			501(c)(3) organ	ızatıon, check
	ection C. Computation of Pub						
14	Public support percentage for 2012	•		11, column (f))		14	
15	Public support percentage for 2011	•	•			15	
	33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this						
	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.						
18	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

);
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Explanation

SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION IN ADDITION TO DIRECT MONETARY SUPPORT, SAN DIEGO STATE UNIVERSITY RESEARCH FOUNDATION ADMINISTERS FUNDS THAT SUPPORT SPONSORED RESEARCH, CAMPUS AND COMMUNITY IMPROVEMENT, AND PUBLIC BROADCASTING FOR SAN DIEGO STATE UNIVERSITY

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493134034874

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION 95-6042721 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 0 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 □ No Was a correction made? ☐ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and h	as NOT
	filed Form 5768 (election under section 501(h)).	

	and Name and the state of the s	(6	1)	(b)
ror e activ	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		13,77
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		162,00
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	O ther activities?		No	
j	Total Add lines 1c through 1i			175,77
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	LIII-A Complete if the organization is exempt under section $501(c)(4)$, section	n 501(c)(5). o	r section

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Tayable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	,	SDSU RESEARCH FOUNDATION PAID \$162,000 TO THE FIRM OF CARPI & CLAY, INC DURING THE FISCAL YEAR THE FIRM REPRESENTS SDSU'S INTERESTS IN WASHINGTON, D C , PRIMARILY IN ACTIVITIES THAT INVOLVE THE COMPETITION FOR FEDERAL RESEARCH FUNDS \$6,125 WAS ALSO PAID TO CALIFORNIA COALITION FOR PUBLIC HIGHER EDUCATION ISSUES COMMITTEE - YES ON PROPOSITION 30 AND \$7,650 TO ASSOCIATION OF PUBLIC TELEVISION ACTION, INC

1 1

DLN: 93493134034874

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION 95-6042721 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year -Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	TITE Organizations Maintaining Co	<u>llections of Art, H</u>	istor	<u>ical Treas</u>	sures, or Otl	<u>ner Similar</u>	<u>Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records,	check	any of the fo	ollowing that ar	e a significant	use of	ıts	
а	Public exhibition	d	ı Γ	Loan or ex	change progra	ms			
b	Scholarly research	e	· _	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain h	now the	y further the	e organızatıon's	exempt purpo	se in		
5	During the year, did the organization solicit of					sımılar	_		_
-	assets to be sold to raise funds rather than t	•				W/U I- F-		Yes	│ No
Pal	Part IV. Ine 9, or reported an an				on answered	"Yes" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				s or other asse	ts not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing	table					
							Amou	nt	
С	Beginning balance				1	С			
d	Additions during the year				1	d			
e	Distributions during the year					e			
f	Ending balance				1	f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1?				Γ,	Yes	Г No
ь	If "Yes," explain the arrangement in Part XII								<u> </u>
Pa	rt V Endowment Funds. Complete								
1-	Beginning of year balance	(a)Current year (b) Prior	year b (c) ,820,376	Two years back (16,178,017	14,628,			7,802,288
1a b	Contributions	681,138	- 10	252,010	414,893	680,	_		315,805
c	Net investment earnings, gains, and losses	001,130		232,010	111,055				
		1,339,124		-505,068	2,589,907	1,575,2	200	-	2,600,433
d	Grants or scholarships				+				
е	Other expenditures for facilities and programs	750,776		396,836	362,441	706,4	113		889,224
f	Administrative expenses								
g	End of year balance	19,439,968	18	,170,482	18,820,376	16,178,	017	1	4,628,436
2	Provide the estimated percentage of the curi	rent year end balance (line 1	ı, column (a))) held as				
а	Board designated or quasi-endowment 🕨	69 000 %							
b	Permanent endowment ► 25 000 %								
С	Temporarily restricted endowment ► 60	00 %							
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%							
За	Are there endowment funds not in the posses	ssion of the organization	n that	are held and	l administered	for the			
	organization by					Г	5 (1)	Yes	No
	(i) unrelated organizations						3a(i) 3a(ii)	Yes	No
b	(ii) related organizations			dule R?			3b	Yes	
4	Describe in Part XIII the intended uses of th	•						100	
Pai	t VI Land, Buildings, and Equipme								
	Description of property			Cost or other (investment)		er (c) Accumul depreciation		(d) Boo	ok value
1a	Land			475,302	2 20,801,9	36		2:	1,277,238
b	Buildings			525,852	2 68,558,6	93 30,41	9,671	38	8,664,874
C	Leasehold improvements								
d	Equipment				24,529,6	07 17,96	0,615	(6,568,992
	Other								
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X, c	olumn	(B), line 10(c).) 	•		66	5,511,104
						Schedu	le D (F	orm 9	90) 2012

Part VIII Investments—Other Securities. See		2.	
(a) Description of security or category	(b) Book value		od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
		1.2	
Part VIII Investments—Program Related. See			
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
		1	
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	otion		(b) Book value
Total. (Column (b) must equal Form 990. Part X. col.(B) line 15	.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.	, , , , , , , ,	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(b) Book value		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS	(, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS DUE TO SDSU AUXILIARY	(b) Book value 397,823 40,698,567		
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS	(, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS DUE TO SDSU AUXILIARY	(b) Book value 397,823 40,698,567		
1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS DUE TO SDSU AUXILIARY	(b) Book value 397,823 40,698,567		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS DUE TO SDSU AUXILIARY	(b) Book value 397,823 40,698,567		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes AMOUNTS HELD FOR OTHERS DUE TO SDSU AUXILIARY	(b) Book value 397,823 40,698,567		

1			eturn
_	Total revenue, gains, and other support per audited financial statements	1	177,407,272
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	11,105,056
3	Subtract line 2e from line 1	3	166,302,216
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	C
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	166,302,216
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	172,090,660
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	3	
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)	7	
e	Add lines 2a through 2d	2e	10,671,520
3	Subtract line 2e from line 1	3	161,419,140
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	5	
c	Add lines 4a and 4b	4c	1,288,735
		-	162,707,875

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS		INTENDED USES OF ENDOWMENT FUND TO PROVIDE INTER-GENERATIONAL INCOME TO AUGMENT PROGRAMS THAT ARE AN INTEGRAL PART OF THE RESEARCH, EDUCATIONAL AND COMMUNITY SERVICE MISSION OF SAN DIEGO STATE UNIVERSITY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		NO FORMAL FOOTNOTE RELATED TO ASC 740 WAS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS AS NO ASC 740 LIABILITIES EXISTED AT YEAR END HOWEVER, MANAGEMENT HAS ADOPTED THE PROVISIONS OF ASC 740 AS REQUIRED BY GAAP AND EXAMINES ITS TAX POSITIONS ANNUALLY AT THE END OF THE YEAR MANAGEMENT DETERMINED AND ITS AUDITORS CONFIRMED THAT NO ASC 740 LIABILITIES EXISTED AT YEAR END
PART XI, LINE 2D - OTHER ADJUSTMENTS		NET EFFECT OF TRANSFER TO AZTEC SHOPS -414,070 RENTAL EXPENSES NETTED ON TAX RETURN 10,003,387
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED ON TAX RETURN 10,003,387
PART XII, LINE 4B - OTHER ADJUSTMENTS		INCREASE IN EQUITY OF PLANT FUND ASSETS 1,288,735

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As Filed Data -

DLN: 93493134034874

OMB No 1545-0047

No

2012

Open to Public Inspe<u>ction</u>

Employer identification number

SCHEDULE F Stat

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
SAN DIEGO STATE UNIVERSITY FOUNDATION

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	See Add'l Data					
За	Sub-total	0	7			213,300
b	Total from continuation sheets to Part I	0	0			0
С	Totals (add lines 3a and 3b)	0	7			213,300

(a) Name of organization	(b) IRS code section and EIN (if applicable)	1	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		E ASIA & PACIFI	TRAINING	101,500	СНЕСК			
		E ASIA & PACIFI	TRAINING	52,115	СНЕСК			
		E ASIA & PACIFI	TRAINING	7,112	СНЕСК			
		EUROPE	TRAINING	13,636	CHECK			
			sted above that are r			ountry, recognized letter		0

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
TRAVEL ASSISTANCE	EAST ASIA & PACIFIC	1	56	СНЕСК		1	аррічісті,
TRAVEL ASSISTANCE		3	3,337	WIRE '		1	
TRAVEL ASSISTANCE	EUROPE	7	13,408	СНЕСК		1	1
TRAVEL ASSISTANCE	MID EAST & NO AFRICA	4		СНЕСК			<u> </u>
TRAVEL ASSISTANCE	NORTH AMERICA	18	13,957	CHECK			
TRAVEL ASSISTANCE	SOUTH AMERICA	3	1,500	CHECK		1	
TRAVEL ASSISTANCE	SOUTH ASIA	2	1,204	СНЕСК			
			1	'		1	
				,		1	

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	⊽	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	<u> </u>	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u> ~</u>	Νo

Schedule F (Form 990) 2012

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also con	nplete this part to provide any a	dditional information (see instructions).
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 EXPLANATION FOR GRANTS OUTSIDE US FOREIGN AND DOMESTIC EXPENDITURES ON GRANTS AND CONTRACTS ARE CLOSELY MONITORED BY SDSU RESEARCH FOUNDATION STAFF TO COMPLY WITH SPONSOR REQUIREMENTS FEDERAL GRANTS REPRESENT A SUBSTANTIAL MAJORITY OF GRANT AND CONTRACT EXPENDITURES AND ACCORDINGLY, ARE SUBJECT TO AUDIT BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES, THE COGNIZANT GOVERNMENT AUDIT AGENC FOR SDSU REASEARCH FOUNDATION
i i		1

Additional Data

Software ID:

Software Version:

EIN: 95-6042721

Name: SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EAST ASIA & THE PACIFIC		6	PROGRAM SERVICES	TRAINING	160,727
EUROPE		1	PROGRAM SERVICES	TRAINING	13,636
EAST ASIA & THE PACIFIC			GRANTS		56

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
MIDDLE EAST & NO AFRICA			GRANTS		5,475					
NORTH AMERICA			GRANTS		13,957					
SOUTH ASIA			GRANTS		1,204					

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
SOUTH AMERICA			GRANTS		1,500				
EUROPE			GRANTS		16,745				

DLN: 93493134034874

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public

Name of the organization	Employer identification number
SAN DIEGO STATE UNIVERSITY FOUNDATION	
DBA SDSU RESEARCH FOUNDATION	95-6042721

nternal Revenue Service							Inspection
Name of the organization SAN DIEGO STATE UNIVERSIT DBA SDSU RESEARCH FOUNDA						Employer ident 95-6042721	tification number
Part I Fundraising Act	ivities. Complete ı	f the or	ganızatı	on a	answered "Yes" to	Form 990, Part IV,	line 17.
 Indicate whether the organ 	citations written or oral agreen Form 990, Part VII) o t paid individuals or er	nent with r entity i ntities (fu	e f g any Indi	マ マ マ vidu	Solicitation of non- Solicitation of gove Special fundraising al (including officers with professional fu	government grants ernment grants events s, directors, trustees endraising services?	Г Yes Γ No draiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv	/) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON ROAD 100 SAN DIEGO, CA 92123	CAR DONATIONS	Yes Yes	No		650,759	164,815	485,944
	TELEFUNDRAISING		No		120,018	54,137	65,881

ST CLOUD, MN 56301 TELEFUNDRAISING HARRIS DIRECT 6800 OWENSMOUTH Νo 66,062 40,360 25,702 CANOGA PRK, CA 91303 TELEFUNDRAISING COMNET MARKTNG 1214 SLOWE AVE Νo 16,934 8,214 8,720 MEDFORD, OR 97501 853,773 267,526 586,247

3	List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration of
	licensing

Sche	dule	e G (Form 990 or 990-EZ) 2012				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		<u> </u>	(a) Event #1 ANIVERS GALA	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	202,42	7		202,427
9. 9.	2	Less Contributions	22,44	5		22,445
~ 	3	Gross income (line 1 minus line 2)	179,98	2		179,982
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	61,55	6		61,556
ă	7	Food and beverages .				
Direct	8	Entertainment				
ឨ	9	Other direct expenses .	151,38	6		151,386
	10	Direct expense summary Add lir	nes 4 through 9 ın columı	n (d)		(212,942)
	11	Net income summary Combine I	ine 3, column (d), and line	e 10		-32,960
Par	t II			"Yes" to Form 990, Pa	art IV, line 19, or rep	
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rey	1	Gross revenue				
နှစ်	2	Cash prizes				
kpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
Ē	5	Other direct expenses				
	6	Volunteerlabor	┌ Yes	┌ Yes	│	
7 Direct expense summary Add lines 2 through 5 in column (d)						
	8	Net gaming income summary Com	nbine lines 1 and 7 in col	umn (d)	🛌	
9 a b						
10a b		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No If "Yes," explain				

Does	s the organization operate gaming act	ivities with nonmembers?		· · Fyes FNo		
12	Is the organization a grantor, benefi	cıary or trustee of a trust or a mem	ber of a partnership or other entity			
	formed to administer charitable gam	ning?		Г _{Yes} Г _{No}		
13	Indicate the percentage of gaming a	activity operated in				
а	The organization's facility			13a		
b	An outside facility			13b		
14	Enter the name and address of the p	person who prepares the organization	n's gamıng/special events books a	and records		
	Name 🟲					
	Address ►					
15a	Does the organization have a contra			· · · · F vas F No		
ь	If "Yes," enter the amount of gaming					
	amount of gaming revenue retained					
c	If "Yes," enter name and address of					
	Name 🕨					
	Address 🟲					
16	Gaming manager information					
	Name •					
	Gaming manager compensation 🟲 \$					
	Description of services provided					
	Director/officer	□ Employee	Independent contractor			
17	Mandatory distributions	Limployee	i independent contractor			
	retain the state gaming license?					
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent						
	in the organization's own exempt ac		,			
Par	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).					
	Identifier	Return Reference	Explana	tion		

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2012

DLN: 93493134034874

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury Attach to Form 990 **Inspection** Internal Revenue Service Name of the organization **Employer identification number** SAN DIEGO STATE UNIVERSITY FOUNDATION 95-6042721 DBA SDSU RESEARCH FOUNDATION Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? $\dots\dots\dots\dots\dots\dots\dots$ Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC Code section (d) Amount of cash (e) Amount of non-(f) Method of (g) Description of (a) Name and address of **(b)** EIN (h) Purpose of grant ıf applıcable non-cash assistance or assistance organization valuation grant cash or government assistance (book, FMV, appraisal, other) (1) SAN DIEGO STATE 33-0373293 GOVERNMENT 6,746,779 SUPPORT UNIVERSITY UNIVERSITY 550 CAMPANILE DRIVE SAN DIEGO, CA 92182

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) FELLO WSHIPS	1050	6,165,724			
(2) BOOKS & SUPPLIES	450	447,106			
(3) TRAVEL ASSISTANCE	400	335,488			
(4) OTHER STUDENT COSTS	50	26,021			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 DESCRIPTION OF PROCEDURES FOR MONITORING GRANT USAGE FELLOWSHIPS ARE PRIMARILY GRANTED TO INDIVIDUALS TO HELP THEM IMPROVE THEIR RESEARCH SKILLS AS SUCH, THE RESPONSIBLE PRINCIPAL INVESTIGATOR CLOSELY MONITORS THE PROGRESS OF THE RECIPIENTS

Schedule I (Form 990) 2012

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DLN: 93493134034874

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

Рā	Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	,			
Ь	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods			
	used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract Independent compensation consultant Compensation survey or study			
	☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization			
	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			l
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			1
	compensation contingent on the revenues of			1
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			ĺ
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	_		١.,
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			ĺ
	in Part III	8		No.
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	Ť		
-	section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 95-6042721

Name: SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Form 990, Schedule J,	<u>, Part J</u>				Highest Compens	sated Employees	<u>, </u>	
(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
ELIZABETH A KLONOFF	(1) (11)) 65,659) 142,729		0 0	6,566 25,584	0 7,400	72,225 175,713	
KAREN D EMMOREY	(ı) (ıı)			0	7,836 20,323	0 20,050	86,199	0
MARILYN NEWHOFF	(ı) (ıı)		0	0 762	0 35,227	, 0 7,800	0	0
MARY ANN LYMAN- HAGER	(ı) (ıı)				5,449 21,566	0 14,692	59,936	0
ROBERTA GOTTLIEB	(I) (II)) 86,847) 191,907		0 0	8,685 32,545	0 10,315	95,532	0
SALLY F ROUSH	(I) (II))) 245,587	0 0	- I	0 45,999	0 8,655	0	0
ELLIOT HIRSHMAN	(I) (II)			0	, 0 67,008	, 0 22,534	50,000	0
RANDOLPH PHILIPP	(I) (II)				2,012 22,064	, 0 19,971	22,128	0
STEPHEN WELTER	(I) (II)		0	· · · · · · · · · · · · · · · · · · ·	0 41,162	0 21,735	0	0
NANCY A MARLIN	(ı) (ıı)		0 0		0 47,717	0 7,800	0	0
SANFORD I BERNSTEIN	(I) (II)				4,465 21,777	0 19,733	49,117	0
BOB E WOLFSON	(ı) (ıı)		0 0	0 762	0 34,921	0 15,168	0	0
MELINDA S COIL	(ı) (ıı)		0	0	15,556	20,610		
MICHELE GOETZ	(ı) (ıı)		0	0	15,556 0	14,295 0	185,414	0
WILLIAM T HUSHEN	(ı) (ıı)		0 0	0	16,311 0	22,668 0	202,089	0
THOMAS KARLO	(ı) (ıı))) 214,113	0 0	I	0 41,162	0 15,168	0 270,839	
JOE B SHAPIRO	(ı) (ıı)		0 0	- 1	0 30,634	0 19,778	0	0
STEPHEN FISHER	(ı) (ıı)) 660,180) 266,206		0 8,417	0 49,426	0 16,899	660,180	0
RODERICK LONG	(I) (II)) 640,000) 209,435		0	0 40,205	0	640,000	0
EDWARD RILEY	(ı) (ıı)) 96,544) 184,324		0	9,654 30,023	0	106,198	0

Form 990, Schedule J, Pai	TT	<u>1 - Officers, Direc</u>	tors, Trustees, Ke	Hignest Compens	sated Employees				
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
JAMES STERK	(I) (II)	130,000 224,202	U	0 15,637	0 43,076	0 19,778	130,000 302,693		
MELBOURNE HOVELL	(I) (II)	111,460 154,775	U	0	11,146 29,671	0 14,378	122,606 198,824		

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DLN: 93493134034874 OMB No 1545-0047

2012

Open to Public

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Inspection Employer identification number

95-6042721

DBA SDSU RESEARCH FOUNDATION

SAN DIEGO STATE UNIVERSITY FOUNDATION

P	art I Bond Issues											
(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	TRUSTEES CALIF STATE UNIVERSITY	94-6001347	13077CUP7	04-06-2010	160,852,254	REFUND 1998 & 1999 BONDS		X		Х	Х	
В	TRUSTEES CALIF STATE UNIVERSITY	91-2155587	13077CYL2	08-22-2012	436,220,000	REFUND 2002 BONDS		Х		Х	Х	
	_											

Pai	t III Proceeds				
		Α	В	С	D
1	A mount of bonds retired	955,000			
2	A mount of bonds legally defeased				
3	Total proceeds of issue	5,285,000	10,400,000		
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows	5,241,802	10,328,047		
7	Issuance costs from proceeds	43,198	71,953		
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds				
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion				
		Yes No	Yes No	Yes No	Yes No

		Yes	No	Yes	No	Yes	No	Yes	No No
14	Were the bonds issued as part of a current refunding issue?	Х		Х					
15	Were the bonds issued as part of an advance refunding issue?		Х		Х				
16	Has the final allocation of proceeds been made?	Х		Х					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х		Х					
Par	t IIII Private Business Use								
					<u> </u>		•		

			4		В	Į.	С	I)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		х				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х		Х				
Ear	r Panarwork Poduction Act Natice see the Instructions for Form 900		at No 501	0.3 E			Sel	odulo K (For	000\ 2012

sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		ı							
				Α		B		<u>C</u>	 	D
3a	Are there any management or service contracts that may result in private	business use	Yes	No	Yes	No	Yes	No	Yes	No
J a	of bond-financed property?			Х		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			%		%		%	1	%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth (c)(3) organization, or a state or local government			%		%		%		%
6	Total of lines 4 and 5			%		%		%	,	%
7	Does the bond issue meet the private security or payment test?			Х		Х				
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bor issued?			х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%	,	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements unclearly Regulations sections 1 141-12 and 1 145-2?		Х		Х					
Par	t IV Arbitrage			'		<u>'</u>		•		•
		Α			В		С		D	
	W W 0000 TO	Yes	No	Yes	No	Yes	;	No	Yes	No
1	Has the Issuer filed Form 8038-T?		X		X					
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?	Х		X						
b	Exception to rebate?		Х		X					
c	No rebate due?	Х		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Χ		Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		х					
b	Name of provider									
С	Term of hedge	ļ								
d	Was the hedge superintegrated?									
е	Was a hedge terminated?									
_				_						_

Part IV Arbitrage (Continued)

ADDITIONAL INFORMATION

D

			Α.		В		c		D	
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed in contract (GIC)?	nvestment		х		х				
b	Name of provider									
С	Term of GIC									
d	Was the regulatory safe harbor for establishing to value of the GIC satisfied?	he faır market								
6	Were any gross proceeds invested beyond an av period?	aılable temporary		×		х				
7	Has the organization established written proceduthe requirements of section 148?	ires to monitor	X		X					
Pa	rt V Procedures To Undertake Correc	tive Action								
			А		В		С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written proceduthat violations of federal tax requirements are tine and corrected through the voluntary closing agreeself-remediation is not available under applicable.	mely identified eement program if	х		х					
			-	•						
Pa	art VI Supplemental Information. Co	mplete this part to pro	ovide addition	al informati	on for respon	ses to ques	tions on Sche	dule K (see	instructions)	
1	Identifier Retur	n Reference				Explan	ation			

В

С

Schedule K (Form 990) 2012

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DLN: 93493134034874

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

SAN DIEGO STATE UNIVERSITY FOUNDATION

Name of the organization **Employer identification number** DBA SDSU RESEARCH FOUNDATION 95-6042721 Part I Types of Property

		(a) Check	(b) Number of contributions	(c) Noncash contribution	(d) Method of de		
		ıf	or items contributed	amounts reported on Form 990, Part VIII, line	noncash contribu	ition amou	nts
		applicable		1g			
1	Art—Works of art			<u> </u>			
2	Art—Historical treasures .						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles	Х	1,300	650,759	SELLING PRICE		
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded .	Х	16	125,916	SELLING PRICE		
10	Securities—Closely held stock $\ .$						
11	Securities—Partnership, LLC, or trust interests						
12	Securities—Miscellaneous						
13	Qualified conservation contribution—Historic structures						
14	Qualified conservation contribution—Other						
15	Real estate—Residential .						
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies .						
21	Taxidermy						
	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
	AUCTION	\ \ \	40	46.763	CELLING DDICE		
	Other► (ITEMS)	X	40	40,/03	SELLING PRICE		
	O ther ►()						
	Other ► ()						
	Other ► () Number of Forms 8283 received	hu tha arga	nization during the tay yea	r for contributions			
29	for which the organization comple				29		1
30a	During the year, did the organiza	tion receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it	Yes	No
	must hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used		
	for exempt purposes for the enti	re holding p	eriod?		[30a	No
b	If "Yes," describe the arrangeme						
31	Does the organization have a gif	t acceptano	ce policy that requires the r	review of any non-standard	contributions?	31 Yes	
32a	Does the organization hire or use contributions?	e third parti	es or related organizations	to solicit, process, or sell i	noncash		
						32a Yes	+
33	If "Yes," describe in Part II If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a	a) is checked,		

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	HIRE AND USE OF THIRD PARTIES ALSO SEE SCHEDULE G KPBS CONDUCTS A VEHICLE DONATION PROGRAM WITH THE ASSISTANCE OF CHARITABLE AUTO RESOURCES, INC

Schedule M (Form 990) (2012)

DLN: 93493134034874

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	
	FORM 990, PART VI, SECTION A, LINE 7B	DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS UNDER TITLE 5 CALIF CODE OF REGS SECTION 42402, THE UNIVERSITY PRESIDENT IS REQUIRED TO ASSURE THAT SDSURF OPERATE S IN CONFORMITY WITH POLICIES OF THE CALIFORNIA STATE UNIVERSITY AND OF SAN DIEGO STATE UN IVERSITY THE PRESIDENT MAY DISCONTINUE ANY PROGRAM OR EXPENDITURE THAT HE OR SHE DETERMIN ES IS INCONSISTENT WITH THESE POLICIES
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 REVIEW PROCESS A DRAFT OF THE FORM 990 WAS ORIGINALLY PROVIDED TO EACH MEMBER OF THE INVESTMENT COMMITTEE. THE DISCLOSURES, SIGNIFICANT CHANGES AND QUESTIONS WERE DISCUSSE D AND ADDRESSED. THE FORM 990 WAS SUBSEQUENTLY PRESENTED TO EACH MEMBER OF THE BOARD OF DI RECTORS AT A REGULARLY SCHEDULED MEETING. THE DISCLOSURES, SIGNIFICANT CHANGES AND QUESTIO NS WERE AGAIN DISCUSSED AND ADDRESSED.
	FORM 990, PART VI, SECTION B, LINE 12C	EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS SDSU RESEARCH FOUNDATION REQUIRES E ACH INTERESTED PARTY TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS SDS U RESEARCH FOUNDATION ALSO MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUG HITS PURCHASING AND SPONSORED RESEARCH DEVELOPMENT DEPARTMENTS SDSU RESEARCH FOUNDATION STAFF REVIEWS CONTRACTS AND REQUISITIONS FOR POTENTIAL CONFLICTS MANY OF ITS INTERNAL PRO CESSING DOCUMENTS INCLUDE AFFIRMATIONS REGARDING LACK OF CONFLICTS THE BOARD OF DIRECTORS IS AUTHORIZED TO TAKE WHATEVER ACTION IT DEEMS NECESSARY TO RESOLVE POTENTIAL OR ACTUAL C ONFLICTS INCLUDING (1) PROHIBITING THE INTERESTED PARTY FROM DISCUSSIONS OR DECISIONS REG ARDING THE CONFLICT OF INTEREST, (2) MODIFYING OR REDEFINING THE DUTIES AND RESPONSIBILITI ES OF THE INTERESTED PARTY, OR (3) REQUIRING THE RESIGNATION OF THE INTERESTED PARTY
	FORM 990, PART VI, SECTION B, LINE 15A	PURSUANT TO TITLE 5 CAL CODE OF REGS SECTION 42405, SDSU RESEARCH FOUNDATION MAINTAINS S ALARY SCHEDULES COMPARABLE TO SAN DIEGO STATE UNIVERSITY (A CALIFORNIA PUBLIC INSTITUTION) THE SALARIES OF THE EXECUTIVE DIRECTOR AND THE CFO ARE ALSO SUBJECT TO APPROVAL BY THE B OARD OF DIRECTORS
	FORM 990, PART VI, SECTION C, LINE 19	OTHER ORGANIZATIONAL DOCUMENTS PUBLICLY AVAILABLE SDSU RESEARCH FOUNDATION PROVIDES PAPER OR ELECTRONIC COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINA NCIAL STATEMENTS, AND A-133 COMPLIANCE REPORTS TO THE PUBLIC ON REQUEST THE ARTICLES OF I NCORPORATION, BY LAWS, CONFLICT OF INTEREST POLICY, RESEARCH REPORTS, AUDITED FINANCIAL STA TEMENTS, AND A-133 COMPLIANCE REPORTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	IMPLEMENT GASB 65 - BOND ISSUANCE COSTS -2,098,302 INCREASE IN EQUITY OF PLANT FUND ASSETS 1,288,735

DLN: 93493134034874

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION 95-6042721

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (c) Legal domicile (state Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets Direct controlling or foreign country) entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)	(b)	(c)	(d)	(e)	(f)	Τ (g)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	Section	n 512	
· · · · · · · · · · · · · · · · · · ·		or foreign country)	·	(if section 501(c)(3))	entity		(b)(13) controlled	
	'						rolled tity?	
	· ·					Yes	No	
(1) SAN DIEGO STATE UNIVERSITY	PUBLIC HIGHER EDUCATION	CA	GOVERNMENT	+	 	res	No	
(1) SAN DIEGO STATE UNIVERSITY	POBLIC RIGHER EDUCATION	LA CA	GOVERNMENT			'	INO	
5500 CAMPANILE DRIVE					N/A			
SAN DIEGO, CA 92182 33-0373293	'							
(2) THE CAMPANILE FOUNDATION	PHILANTHROPIC ORGANIZATION FOR SDSU	CA	501(C)3	LINE 5			No	
5500 CAMPANILE DRIVE					N/A			
SAN DIEGO, CA 92182 33-0868418						<u> </u>		
(3) AZTEC SHOPS LTD	CAMPUS BOOKSTORE, FOOD SERVICE AND PROPERTY	CA	501(C)3	LINE 11C, III-FI			No	
5500 CAMPANILE DRIVE					N/A	'		
SAN DIEGO, CA 921820001 95-0516240						 		
(4) ASSOCIATED STUDENTS OF SAN DIEGO STATE UNIVERSITY	ADMINISTERING FUNDS IN SUPPORT OF STUDENT	CA	501(C)3	LINE 5			No	
5500 CAMPANILE DRIVE	ACTIVITIES				N/A	'		
SAN DIEGO, CA 921827804 95-6042622						!		
		<u></u>			<u></u>	<u> </u> '	<u> </u>	
						+	\vdash	
						'		

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(† Disprop r alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k) Percentag ownership
					31.,			Yes	No		Yes	No	Į
V Identification of Related Or line 34 because it had one or m	ganizations Taxa ore related organiz	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if trust during	I the organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) (conti	i) on 512 (13) rolled :ity?	
		354.14.7,7]	Yes		No
													\perp

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule								
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organization	ns listed in Parts II-IV?	•					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a	Yes			
b	Gift, grant, or capital contribution to related organization(s)			1b	Yes			
C	Gift, grant, or capital contribution from related organization(s)			1c	Yes			
d	Loans or loan guarantees to or for related organization(s)			1d	Yes			
е	Loans or loan guarantees by related organization(s)			1e	Yes			
f	Dividends from related organization(s)			1f		No		
g Sale of assets to related organization(s)								
h	Purchase of assets from related organization(s)			1h		No		
i	Exchange of assets with related organization(s)			1 i		No		
j	Lease of facilities, equipment, or other assets to related organization(s)			1j	Yes			
k	k Lease of facilities, equipment, or other assets from related organization(s)							
l Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	Yes			
0	Sharing of paid employees with related organization(s)			10	Yes			
р	Reimbursement paid to related organization(s) for expenses			1 p	Yes			
q	Reimbursement paid by related organization(s) for expenses			1q	Yes			
r	O ther transfer of cash or property to related organization(s)			1r	Yes			
s	Other transfer of cash or property from related organization(s)			1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including	· · · · · · · · · · · · · · · · · · ·	1					
	(a) (b) Name of other organization Transaction	(c) Amount involved	(d) Method of determining amo	unt ır	nvolved			
	type (a-s)							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under section 512-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
]	l
				ш				\	-		<u> </u>	ш	

Additional Data ____Return to Form

Software ID: Software Version:

EIN: 95-6042721

Name: SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
TRANSACTIONS	SCHEDULE R,	SOME OF THE ENDOWMENTS OF SDSU RESEARCH FOUNDATION ("SDSURF") ARE INVESTED IN THE ENDOWMENT POOL OF THE CAMPANILE
WITH RELATED	PART V, LINE	FOUNDATION (ANOTHER SDSU AUXILIARY ORGANIZATION) (1A) - SDSURF RECEIVED ROYALTIES FROM AZTEC SHOPS (1B) - IN
ORGANIZATIONS	[1]	ACCORDANCE WITH ITS EXEMPT FUNCTION, SDSURF REGULARLY TRANSFERS MONIES TO SDSU (1C) & (1E) - THE CAMPANILE FOUNDATION
1		ADVANCED FUNDS TO SDSURF (1D), (1G) & (1R) - SDSURF TRANSFERRED ASSETS AND LOANED FUNDS TO AZTEC SHOPS (1J) - SDSURF
1	1	LEASES FACILITIES TO AZTEC SHOPS AND SDSU (1K) - SDSURF LEASES FACILITIES FROM SDSU (1L) & (1M) - SDSURF PERFORMS SERVICES
1		FOR THE CAMPANILE FOUNDATION, AZTEC SHOPS, LTD, AND ASSOCIATED STUDENTS OF SDSU SDSU AND AZTEC SHOPS, LTD PERFORM
1 '	1	SERVICES FOR SDSURF (1N) & (1O) - ALL FIVE ORGANIZATIONS SHARE FACILITIES AND EMPLOYEES (1P) & (1Q) - ALL FIVE
'	<u> </u>	ORGANIZATIONS REIMBURSE EACH OTHER FOR EXPENSES